_		19 05								· .	· L4 · 04			
PATENT APPLICATION FEE DETERMINATION RECO								Application or Docket Number						
Effective October 1, 2003								10709668						
		CLAIMS		S FILED - PART I (Column 1) (Column 2)				SMALL ENTITY			OTHER THAN			
TOTAL CLAIMS			9				7	RATI	E T F	EE	7	RATE	-,	
FOR			NUMB	NUMBER FILED		NUMBER EXTRA		BASIC FEE		5.00	OR	BASIC FE		
TOTAL CHARGEABLE CLAIMS			9,	minus 20=		•		XS 9=			OR	X\$18=		
INDEPENDENT CLAIMS			1	minus 3 =				X43=				X86=	1	
М	MULTIPLE DEPENDENT CLAIM PR							+145=			OR OR		 	
- 1	f the difference	e in column 1 i	zero, enter "0" in column 2			į	TOTAL		_	OR	TOTAL	1		
CLAIMS AS AMENDED - PART II											Uh		THAN	
_	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								L ENTI		OR		ENTITY	
AMENDMENT A		REMAINING AFTER AMENDMENT		PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	TION FE	NAL		RATE	ADDI- TIONAL FEE	
QN	Total	•	Minus			=		X\$ 9=	1	J	OR	X\$18=		
AME	Independent	5NTATION 05 11	Minus	***		=		X43=		\Box	OR	X86=		
	FINST PRES	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1	\neg		+290=		
	•						L	+145= TOTAL			OR. DR .	TOTAL		
ADDIT. FEE (Column 1) (Column 2) (Column 3)											Л П А	DDIT. FEE		
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBE PREVIOU PAID FO	ST ER JSLY	PRESENT EXTRA	Γ	RATE	ADD TION FEE	AL		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		7	R	X\$18=	1,000	
	Independent	•	Minus	•••		=		X43= .	· ·	7	 	X86=		
	FIRST PRESE	NTATION OF ML	JLTIPLE DEI	PENDENT C	LAIM		<u> </u>	 145=	 -	7	R	+290=		
·									 	-	``L	TOTAL		
		(Column 1)		(Caliuma	. 0\		ADI	DIT. FEE	<u> </u>		HĀ	DOIT. FEE		
	`	CLAIMS	· ·	(Column HIGHES	T	Column 3)	Ė			_	_			
		REMAINING AFTER AMENDMENT		PREVIOUS PAID FO	SLY	PRESENT EXTRA	R	ATE	ADDI TIONA FEE			RATE	ADDI- TIONAL	
	otal	•	Minus	**		-	X	\$ 9=	<u>,</u>	٦,,		X\$18=	FEE	
			Minus	***	- 1	=	\vdash	43=			`├-			
F	IRST PRESEN	ST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								_ OF	ìL	X86=		
If the entry in column 1 is less than the entry in column 2 write 10 in column 3											290=			
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL ADDIT. FEE ADDIT. FEE										OF	ADI	TOTAL DIT. FEE		
Th	e *Highest Numb	er Previously Paid	For (Total or	independent)	is the hi	s, enter "3," ghest number fo	Dund in	the app	opriate b	iox in a	olumi	n 1.		
											•		i	